NOTIFICATION.

No. L.D. 301—Legis. 6-52-8, dated Bangalore, 14th May 1952.

Ordered that Notification No. R.S.—9—52-A, R.S.—9—52-B, and INS. IV (3)—19 (52), dated 16th February 1952 of the Employees' State Insurance Corporation prescribing forms for submission of information and return by Principal or immediate employees under the Employees' State Insurance Act, 1948, be republished in the *Mysore Gazette*, for general information.

By Order of His Highness the Maharaja,

N. R. JAYA RAO,
Legal Remembrancer and
Secretary to Government,
Law Department.

GOVERNMENT OF INDIA

MINISTRY OF LABOUR.

Employees' State Insurance Corporation

NOTIFICATION.

New Delhi-2, the 16th February 1952.

No. RS/9/52-A.—In exercise of the powers conferred under Section 73E of the Employees' State Insurance Act, 1948, as amended by the Employees' State Insurance (Amendment) Act, 1951, the Employees' State Insurance Corporation has approved forms SC-1 and SC-2 annexed for submission of information and returns by principal or immediate employers. These forms are hereby published for general information.

The Corporation has also decided that further particulars necessary in any particular case or class of cases may be asked for by the Director-General, or if authorised by him, the Insurance Commissioner, the Deputy Insurance Commissioner, a Regional Director or an Assistant Insurance Commissioner.

FORM SC-1

Employees' State Insurance Corporation

1. Name of the Factory .....
2. Full Registered Address .....
   .....
3. (*a*) Telephone No., if any .....
   (*b*) Telegraphic Address, if any .....
4. Location of Factory :
   (*a*) State ..... (*b*) District .....
   (*c*) Town or village..... (*d*) Nearest Railway Station .....
   (*e*) Name of Road or locality and Municipal No., if any .....
   (*f*) Nearest Post Office where factory is situated .....
   .....

5. Exact nature of work carried on ..... 476 .....

6. Year of Registration of the Factory under the Factories Act .....

7. Nature of proprietorship (whether Registered Joint Stock Company or individual or partners ownership or private registered company .....
.....

8. Principal employer—

(a) Name of the Manager declared as such for the purposes of the Factories Act [Section 7 (1) (f) of the Factories Act, 1948] .....

(b) Name and address of Managing Agents/Managing Director/owner or occupier .....

(c) If it is a Registered Joint Stock Company, name and address of the Chairman of the Board of Directors .....

(d) Name and Residential address of each of the Directors, if Registered Joint Stock Company .....
.....

9. Whether power is used in the Factory ? .....

10. Is any work carried on through contractors or other immediate employers ? .....
If so—
(i) Nature of work.....
(ii) No. of employees so employed .....

11. Total number of persons employed, including those employed through immediate employers, in the factory :—
(i) Males .....
(ii) Females .....

12. Total number of employees (including those employed through immediate employers), the remuneration of each of whom is Rs. 400 per mensem or less :

(a) Manual workers—
(i) No. of Males .....
(ii) No. of females .....
(iii) Total of (i) and (ii) .....

(b) Clerical or supervisory employees :
(i) No. of Males.....
(ii) No. of females .....
(iii) Total of (i) and (ii) .....

(c) Total No. of employees shown in (a) and (b)..... .....

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13. No. of employees (including those employed through immediate employers), who are paid wages or salaries :—

	Daily	Weekly	Fortnightly	Monthly	Otherwise
(*a*) Manual worker ...					
Clerical and Supervisory Staff ...					

14. (*a*) Total amount of wages paid in the preceding month to employees (including those employed through immediate employers), the remuneration of each being Rs. 400 per mensem or less .....

(*b*) The number of employees to whom the wages in (*a*) were paid .....

15. If the number against query No. 11 is less than 20, please state whether 20 or more persons were working on any day of the preceding 12 months on the premises of the factory including the precincts thereof .....

I hereby declare that the statement given above is correct to the best of my knowledge and belief.

Signature .....

Designation.....

Date .....

Place.....

FORM SC-2.

Employees' State Insurance Corporation Employers' Quarterly Return.

For the quarter ending.....

Name and registered postal address of the Employer.

.....

.....

.....

EMPLOYERS' CODE NO.

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Location—

(1) Place..... (2) Name of road, and Municipal No. if any .....

(3) Nearest Railway Station ..... (4) Nearest Post Office..... .....

Name of Manager or occupier .....

Serial No. of entry	Wage Period		Particulars of wage rolls (such as class of employees, department, shift, etc.) or serial No., if there be more than one wage roll used in the quarter	Number of employees covered in the wage roll mentioned in col. 3	Total of the wages payable in respect of each of the wage periods, the last day of which falls within the quarter
	From date and month	To date and month			
1	2		3	4	5
					Rs. a. p.

Grand Total of wages ...

Total of employers' special contribution at..... ....per cent of the Grand Total of wages (Gross amount payable).

I hereby declare that—

(i) the particulars given overleaf are correct to the best of my knowledge and belief;

(ii) the above statement includes the total of wages as defined in sub-section (22) of section 2 of the Employees' State Insurance Act in respect of every employee as defined in sub-section (9) of section 2 of the Act for the periods mentioned therein and that the amount of Rs.....

(Rupees.....) only has been duly paid into the ....., Bank, ... (Station), *vide* Challan No.....dated.....Place.....

Signature .....Date.....

Designation.....For use in Regional Office;

Received in Regional Office on.....acknowledged by..... on.....Entered in Record Card on..... ...by..... ..... Entered in Ledger Sheet on.....by.....File..... on.....by.....

By order of the Corporation,

C. L. KATIAL,

Director-General.

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New Delhi-2, the 16th February 1952.

No. RS/9/52-B.—In exercise of the powers conferred under Section 73E of the Employees' State Insurance Act, 1948, as amended by the Employees' State Insurance (Amendment) Act, 1951, all Principal employers, as defined under the Employees' State Insurance Act, 1948, situated in the Indian Union, excluding the State of Jammu and Kashmir, are hereby required to furnish the information in Form SC-1 within 21 days from the date of issue of the form, to the authority specified in Column 2 hereunder against the State in which the employer's factory is situated.

All Principal employers, as defined under the Employees' State Insurance Act, 1948, situated in the Indian Union, excluding the State of Jammu and Kashmir, are also hereby required to furnish for every quarter ending on the last day of the calendar months of March, June, September and December, return in Form SC-2 within a period of 45 days from the last day of such quarter to the authority specified in Column 2 hereunder against the State in which the employer's factory is situated.

Column No. 1 States	Column No. 2 Authority to whom the information is to be supplied
The States of (*a*) Punjab (I), (*b*) Patiala and East Punjab States Union, (*c*) Rajasthan, (*d*) Himachal Pradesh, (*e*) Delhi, (*f*) Bilaspur, (*g*) Ajmer-Merwara.	Regional Director, Employees' State Insurance Corporation, B-9, Pusa Road, *New Delhi.*
The States of (*a*) Uttar Pradesh, (*b*) Vindhya Pradesh.	Regional Director, Employees' State Insurance Corporation, 7/202, Swarup Nagar, *Kanpur.*
The States of (*a*) Bombay, (*b*) Madhya Pradesh, (*c*) Madhya Bharat, (*d*) Saurashtra, (*e*) Kutch, (*f*) Bhopal.	Regional Director, Employees' State Insurance Corporation, Scheme C, Plot 3, Colaba Road, *Bombay 5.*
The States of (*a*) Madras, (*b*) Hyderabad, (*c*) Mysore, (*d*) Travancore-Cochin, (*e*) Coorg.	Regional Director, Employees' State Insurance Corporation, Jammi Building, Venkatachala Mudali Street, Mylapore, *Madras 4.*
The States of (*a*) West Bengal, (*b*) Assam, (*c*) Bihar, (*d*) Orissa, (*e*) Manipur, (*f*) Tripura.	Regional Director, Employees' State Insurance Corporation, 28, Theatre Road, *Calcutta 16.*

Forms SC-1 and SC-2 are published with Notification No. RS/9/52-A, dated the 16th February 1952, and copies may be obtained from the Regional Director concerned on application.

By order of the Corporation,

C. L. KATIAL,

Director-General.

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New Delhi, the 16th February 1952.

No. INS IV (3) 19/52.—In exercise of the powers conferred by sub-regulation (1) of Regulation 5 of the Employees' State Insurance (General) Regulations, 1950, I hereby determine that, in the case of insured persons in areas where the provisions of Chapters IV and V of the Employees' State Insurance Act, 1948, are brought into force with effect from 24th February 1952, and who are allotted Sets A, B or C of the Contribution and Benefit periods, the first Contribution Period and the first Benefit Period shall begin and end as indicated in the following table :—

Set	Contribution period		Benefit period	
	Begins on midnight of	Ends on midnight of	Begins on midnight of	Ends on midnight of
A	23rd February 1952.	26th July 1952 ...	22nd November 1952.	25th April 1953.
B	23rd February 1952.	27th September 1952.	22nd November 1952.	27th June 1953.
C	23rd February 1952.	31st May 1952 ...	22nd November 1952.	28th February 1953.

C. L. KATIAL,
Director-General.

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